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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004 | | | | | | | | | Application or Dockel Number | | |
|--|--|--|----------------|---|-------------------|----------------|---------------------|-----------------------------|------------------------------|--------------------|--|
| APPLICATION AS FILED - PART ((Column 1) (Column 2) SMALL ENTITY | | | | | | | | | OR | ОТНЕ | R THAN ENTITY |
| FOR N | | | SER FILEC | NUME | NUMBER EXTRA . | | RATE (1) | FEE (1) | 7 | | 7 |
| BA: | SIC FEE CFR 1.16(1), (6), \propto | (e)) | N/A | | N/A | | N/A | 150.00 | 1 | RATE (\$) | 300.00 |
| SE | ARCH FEE CFR 116(4), (1, or (| | NA | | NIA. | | · N/A | \$250 | 1 | N/A | \$500 |
| EXAMINATION FEE (3) CFR.1.16(0, (p), \(\omega \) | | | N/A | | 1 N/A | | N/A | \$100 | 1 | NVA | \$200 |
| TOTAL CLAIMS (37 CFR 1.16(1)) | | | minus 20 = | | • | | X\$ 25 . | | OR | X\$50 . | |
| INDEPENDENT CLAIMS (37 CFR 1.16(N)) | | UMS | mlnus 3. = | | • | | X100 _ | | | X200 . | |
| If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) | | | | | | | +180= | | | +360= | |
| * Kithe difference in column 1 is less than zero, enter "O" in column 2. | | | | | | | TOTAL | | | TOTAL | , |
| ; | APPI | *. 1 1 | SMALL ENTITY | | | OTHER SMALL | R THAN ENTITY | | | | |
| AMENDMENT A | 8/6/9 | MENOMENT . | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT. EXTRA | | RATE (1) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADOI- TIONAL FEE (\$) |
| | (37 CFR 1/16()) Independent | 12 | Minus Minus | 30 | 0 | | X\$ 25 . | · \ | OR ' | X\$50 _ | . \ |
| | DICER LIGHT | | | 9 | 100 | | X100 = | | OR | X200 _ | |
| AR | Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1:16(0)) | | | | | | +180= | | | +360= | |
| The state of the s | | | | | | | TOTAL | | OR | TOTAL | |
| | | (Column 1) | • | (Caluma 2) | (Column 2) | | ADD'L FEE | - t | OR | ADD'L FEE | - |
| MENDMENT 8 | | CLAIMS REMAINING AFTER AMENDMENT. | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) |
| | Total (37 CFR 1,16(1) | | Minus. | •• | * | | X\$ 25 . | | OR | X\$50 = | |
| | Independent (37 CFR 1.16(h)) | | Minus | 804 | n' | | X100 " | | OR 1 | X200 | |
| AM | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) | | | | | l d | +180≈ | | OR | +360≈ | |
| | | | | | | | TOTAL. ADD'L FEE | | OR . | TOTAL ADD'L FEE | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". | | | | | | | | | | | |

The Highest Number Previously Paid For (Total or Independent) is the highest number (ound in the appropriate box in column 1.

The Highest Number Previously Paid For (Total or Independent) is the highest number (ound in the appropriate box in column 1.

This collection of Indomation is required by 37 CFR 1.16. The information is required to obtain to retain a benefit by the public which is to life (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completed. "USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completed. "Including gathering, preparing, and submitting the completed application from to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Dependment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND TQ: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.